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Bib Data Sheet

CONFIRMATION NO. 7682

SERIAL NUMBER 10/763,738	FILING DATE 06/18/2004 RULE	CLASS 473	GROUP ART UNIT 3711	ATTORNEY DOCKET NO.
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APPLICANTS

William Charles Abildgaard, Wallingford, CT;

** CONTINUING DATA ***** None (CMA)

** FOREIGN APPLICATIONS ***** None (CMA)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 07/20/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CT	SHEETS DRAWING 1	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
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Verified and Acknowledged
 Examiner's Signature (CMA) Initials

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TITLE
 Quicker hands

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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